

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	50544.00010 NVLS 432
	First Named Inventor	Thomas M. Pratt
	<b>COMPLETE IF KNOWN</b>	
	Application Number	Unknown
	Filing Date	Herewith
	Group Art Unit	Unknown
	Examiner Name	Unknown

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Magnetically Coupled Linear Servo-Drive Mechanism**

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

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**Burden Hour Statement:** This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
<b>NAME OF SOLE OR FIRST INVENTOR:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any])			<b>Family Name</b> or Surname		
Thomas M.			Pratt		
<b>Inventor's Signature</b>				<b>Date</b>	
San Jose		CA		U.S.A.	
<b>Residence: City</b>		<b>State</b>		<b>Country</b>	
U.S.		<b>Citizenship</b>			
c/o Novellus Systems, Inc., 4000 North First Street					
<b>Mailing Address</b>					
San Jose		CA		95134	
<b>City</b>		<b>State</b>		<b>Zip</b>	
U.S.A.		<b>Country</b>			
<b>NAME OF SECOND INVENTOR:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> (first and middle [if any])			<b>Family Name</b> or Surname		
Scott D.			McClelland		
<b>Inventor's Signature</b>				<b>Date</b>	
San Jose		CA		U.S.A.	
<b>Residence: City</b>		<b>State</b>		<b>Country</b>	
U.S.		<b>Citizenship</b>			
c/o Novellus Systems, Inc., 4000 North First Street					
<b>Mailing Address</b>					
San Jose		CA		95134	
<b>City</b>		<b>State</b>		<b>Zip</b>	
U.S.A.		<b>Country</b>			
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					

Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Craig L.		Stevens	
Inventor's Signature		Date	
Residence: City	Ben Lomond	State	CA
Country	U.S.A.	Citizenship	U.S.
Mailing Address c/o Novellus Systems, Inc., 4000 North First Street			
Mailing Address			
City	San Jose	State	CA
ZIP	95134	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Kerry		Hopkins	
Inventor's Signature		Date	
Residence: City	Gilroy	State	CA
Country	U.S.A.	Citizenship	U.S.
Mailing Address c/o Novellus Systems, Inc., 4000 North First Street			
Mailing Address			
City	San Jose	State	CA
Zip	95134	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
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AUTHORIZATION OF AGENT**

<b>Application Number</b>	UNKNOWN
<b>Filing Date</b>	HEREWITH
<b>First Named Inventor</b>	Thomas M. Pratt
<b>Group Art Unit</b>	UNKNOWN
<b>Examiner Name</b>	UNKNOWN
<b>Attorney Docket Number</b>	50544.00010 NVLS 432

I hereby appoint:

☐ Practitioners at Customer Number  
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☒ Practitioner(s) named below:

Name/ Registration Number
Marc A. Sockol, Reg. No. 40,823; Daryl C. Josephson, Reg. No. 37,365; Arnold de Guzman, Reg. No. 39,955; Cameron Kerrigan, Reg. No. 44,826; Patrick D. Benedicto, Reg. No. 40,909; David B. Abel, Reg. No. 32,394; Nathan Lane, Reg. No. 43,738; Lorinda Howland, Reg. No. 42,671; Michael Lechter, Reg. No. 27,350; David Koo, Reg. No. 46,839; David Rogers, Reg. No. 38,287; William Bachand, Reg. No. 34,980; Aaron Wininger, Reg. No. 45,229; Paul A. Durdik, Reg. No. 37,819; Paul J. Meyer 17,791; Victoria L. Nicholson, Reg. No. 47,823; and Fariba Sirjani, Reg. No. 47,947.

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**1<sup>st</sup> Name

Thomas M. Pratt

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

**SIGNATURE of Applicant or Assignee of Record**2<sup>nd</sup> Name

Scott Douglas McClelland

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms is submitted. Page 1 of 2



# **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

<b>Application Number</b>	UNKNOWN
<b>Filing Date</b>	HEREWITH
<b>First Named Inventor</b>	Thomas M. Pratt
<b>Group Art Unit</b>	UNKNOWN
<b>Examiner Name</b>	UNKNOWN
<b>Attorney Docket Number</b>	50544.00010 NVLS 432

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☒ Practitioner(s) named below:

Name/ Registration Number
Marc A. Sockol, Reg. No. 40,823; Daryl C. Josephson, Reg. No. 37,365; Arnold de Guzman, Reg. No. 39,955; Cameron Kerrigan, Reg. No. 44,826; Patrick D. Benedicto, Reg. No. 40,909; David B. Abel, Reg. No. 32,394; Nathan Lane, Reg. No. 43,738; Lorinda Howland, Reg. No. 42,671; Michael Lechter, Reg. No. 27,350; David Koo, Reg. No. 46,839; David Rogers, Reg. No. 38,287; William Bachand, Reg. No. 34,980; Aaron Winger, Reg. No. 45,229; Paul A. Durdik, Reg. No. 37,819; Paul J. Meyer 17,791; Victoria L. Nicholson, Reg. No. 47,823; and Fariba Sirjani, Reg. No. 47,947.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

## **SIGNATURE of Applicant or Assignee of Record**

3<sup>rd</sup> Name

Craig L. Stevens

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

## **SIGNATURE of Applicant or Assignee of Record**

4<sup>th</sup> Name

Kerry Hopkins

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms is submitted. Page 2 of 2